

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Mississippi Republican Party

ADDRESS (number and street)

P. O. Box 60

☐ Check if different than previously reported. (ACC)

Jackson

MS

39205-0060

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00084368

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul V. Breazeale

Signature of Treasurer

Paul V. Breazeale

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Mississippi Republican Party

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
01		31		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td colspan="5">28623.63</td></tr></table>	28623.63				
Y	Y	Y	Y	Y													
2016																	
28623.63																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">28623.63</td></tr></table>	28623.63															
28623.63																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">36853.95</td></tr></table>	36853.95					<table><tr><td colspan="5">36853.95</td></tr></table>	36853.95									
36853.95																	
36853.95																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">65477.58</td></tr></table>	65477.58					<table><tr><td colspan="5">65477.58</td></tr></table>	65477.58									
65477.58																	
65477.58																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">19515.59</td></tr></table>	19515.59					<table><tr><td colspan="5">19515.59</td></tr></table>	19515.59									
19515.59																	
19515.59																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">45961.99</td></tr></table>	45961.99					<table><tr><td colspan="5">45961.99</td></tr></table>	45961.99									
45961.99																	
45961.99																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">13485.79</td></tr></table>	13485.79															
13485.79																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Mississippi Republican Party

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	6

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

12555.00

12555.00

(ii) Unitemized

15413.00

15413.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

27968.00

27968.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

400.00

400.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

28368.00

28368.00

12. Transfers From Affiliated/Other

Party Committees.....

1250.00

1250.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

2.16

2.16

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

7233.79

7233.79

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

7233.79

7233.79

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

36853.95

36853.95

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

29620.16

29620.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	2608.83	2608.83
(ii) Non-Federal Share.....	2783.34	2783.34
(b) Other Federal Operating Expenditures	7653.96	7653.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13046.13	13046.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	6469.46	6469.46
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	6469.46	6469.46
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19515.59	19515.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16732.25	16732.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	28368.00	28368.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28368.00	28368.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	10262.79	10262.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	10262.79	10262.79

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

This report is being amended to reflect the following changes: 1. Individual contribution changes 2. Revised debt schedule 3. Included H2 4. Corrected itemization of credit card payments

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 33
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Caron Thornton

Mailing Address 1342 County Road 17

City	State	Zip Code
Bay Springs	MS	39422-7419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tree Land Products Inc

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2016

Transaction ID : AF3325EA0F1F344D0A02

Amount of Each Receipt this Period

250.00

☒ Memo Item

Partnership

Full Name (Last, First, Middle Initial)

B. Randy Easterling

Mailing Address 607 Tiffintown Rd.

City	State	Zip Code
Vicksburg	MS	39183

FEC ID number of contributing
federal political committee.

C

Name of Employer

River Region Health Systems

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2016

Transaction ID : A875017C203B649409D6

Amount of Each Receipt this Period

240.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Betty Coleman

Mailing Address 1941 Old Leland Rd.

City	State	Zip Code
Greenville	MS	38703

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2016

Transaction ID : A8C21ECDEFB7446FE998

Amount of Each Receipt this Period

240.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

480.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 33
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Joe F. Sanderson, Jr.

Mailing Address P.O. Box 988

City	State	Zip Code
Laurel	MS	39441-0988

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sanderson Farms

Occupation

Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2016

Transaction ID : AC82533D69CCF4182BB9

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michelle Marston

Mailing Address 176 River Park Drive

City	State	Zip Code
Jackson	MS	39202-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer

State Treasurer's Office

Occupation

Chief Of Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2016

Transaction ID : A4526DD1963B5471A8FA

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David Burckel

Mailing Address 67 Dover Trace

City	State	Zip Code
Hattiesburg	MS	39401-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Development Resources

Occupation

CEO of Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2016

Transaction ID : A4D58725CB6D04275A26

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

6500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Leland Speed

Mailing Address P. O. Box 22728

City
Jackson

State
MS

Zip Code
39225-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkway Properties, Inc.

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 19 / 2016

Transaction ID : A5A48134D99924A57B7F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kimberly Remak

Mailing Address 5240 Wedgewood Drive

City

Olive Branch

State

MS

Zip Code

38654-6617

FEC ID number of contributing
federal political committee.

C

Name of Employer

ARC of NW MS

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 19 / 2016

Transaction ID : A35279107B2654036963

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Geza Remak

Mailing Address 5240 Wedgewood Drive

City

Olive Branch

State

MS

Zip Code

38654-6617

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 19 / 2016

Transaction ID : A7B0C53D807B045F48DD

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Wirt Yerger, Jr.

Mailing Address 129 Woodland Circle

City

Jackson

State

MS

Zip Code

39216-4194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 19 / 2016

Transaction ID : A3EDFBB38FFE9464D880

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mrs. James Miller

Mailing Address 1200 Meadowbrook Rd. Apt. # 36

City

Jackson

State

MS

Zip Code

39206

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 19 / 2016

Transaction ID : AA763DC7967FE48F2A84

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brandon Payne

Mailing Address P.O. Box 6213

City

Gulfport

State

MS

Zip Code

39506-6213

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Payne Group

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

01 / 20 / 2016

Transaction ID : A5C59C0379A3F451C96E

Amount of Each Receipt this Period

800.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Wirt Yerger, Jr.

Mailing Address 129 Woodland Circle

City

Jackson

State

MS

Zip Code

39216-4194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

01 / 21 / 2016

Transaction ID : AC661E8E235CE453B8F0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Louise Mcdonald

Mailing Address 915 Morningside Dr.

City

Brookhaven

State

MS

Zip Code

39601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 27 / 2016

Transaction ID : AD37A7F00ADA24CC388D

Amount of Each Receipt this Period

250.00

☐ Memo Item

Check deposited in error

Full Name (Last, First, Middle Initial)

C. Denise Doyle

Mailing Address 6505 Shore Drive

City

Ocean Springs

State

MS

Zip Code

39564-2521

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 27 / 2016

Transaction ID : AD71B631BD9754BB5B06

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 33

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Harold Clark

Mailing Address 501 Academy Road

City
StarkvilleState
MSZip Code
39759-4047FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Businessman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2016

Transaction ID : A51E820C28D934B9294B

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hardy Graham

Mailing Address P. O. Box 5207

City
MeridianState
MSZip Code
39302-5207FEC ID number of contributing
federal political committee.

C

Name of Employer

Meridian Coca-cola Btlg. Co.

Occupation

Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2016

Transaction ID : ABE2767D725914D22B05

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Danny L. Dilworth

Mailing Address 275 County Road 514

City
RienziState
MSZip Code
38865FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Tree Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2016

Transaction ID : AD8253EBD9A964C5E8FC

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. W. P. Bridges, Jr.

Mailing Address 1904 Lakeland Drive

attn: Nancy

City

Jackson

State

MS

Zip Code

39216-5038

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridges Mortgage Co.

Occupation

Mortgage Co. Exec.

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

01 / 27 / 2016

Transaction ID : AAAEDF9697D504FD7B4F

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Caron S thornton Family, LLC

Mailing Address 1342 CR 17

City

Bay Springs

State

MS

Zip Code

39422-7419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 27 / 2016

Transaction ID : AA1CC574989B9445AB05

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

12555.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 33

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Gregg Harper for Congress

Mailing Address P.O. Box 54344

City

Jackson

State

MS

Zip Code

39288-4344

FEC ID number of contributing
federal political committee.

C

C00441295

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

01 / 19 / 2016

Transaction ID : A218445FA5CD04696B84

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kelly for Congress

Mailing Address PO Box 7092

City

Tupelo

State

MS

Zip Code

38802-7092

FEC ID number of contributing
federal political committee.

C

C00573980

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

01 / 19 / 2016

Transaction ID : A16BFF217512544659A7

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 33

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Republican National Committee

Mailing Address 310 First Street, S.E.

City
Washington

State
DC

Zip Code
20003-1885

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

01 / **04** / **2016**

Transaction ID : AB563364B83314857AE4

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

1250.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Mississippi Republican Party

A. Blue Cross & Blue Shield of MS

Date of Disbursement

Transaction ID : B213AC4FAE5324A62A9D

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

1297.66

 Memo Item

B. Catherine Peyton

Date of Disbursement

MM / DD / YYYY

Transaction ID : B4AC97B0081A447E58D5

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

145.60

Memo Item

C. Internal Revenue Service

Date of Disbursement

Transaction ID : B0295419B787441F38B4

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

1917.86

 Memo Item

3361.12

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Mississippi Republican Party

A. PolitiCap

Mailing Address 134 Cedar Woods

City	State	Zip Code
Madison	MS	39110-6504

Purpose of Disbursement	001-Fundraising Consultant
-------------------------	----------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : BD1312E873645421386D

Amount of Each Disbursement this Period

3500.00

 Memo Item

Full Name (Last, First, Middle Initial)

B. Mississippi Department of Revenue

Mailing Address P. O. Box 960

City	State	Zip Code
Jackson	MS	39205-0960

Purpose of Disbursement
001-Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M / D D / Y Y Y Y
01 15 2016

Transaction ID : B417BCD89087B4F14B7B

Amount of Each Disbursement this Period

355.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP, Inc.

Mailing Address 5680 New Northside Drive

City	State	Zip Code
Atlanta	GA	30328-4668

Purpose of Disbursement	
001-Payroll Processing Fee	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement



Transaction ID : BDE1E67C1E01C416C9D2

Amount of Each Disbursement this Period

105.90

 Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3960.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 33

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 5680 New Northside Drive

City

Atlanta

State

GA

Zip Code

30328-4668

Purpose of Disbursement

001-Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 22 / 2016**Transaction ID : B727AD828380842ACAA9**

Amount of Each Disbursement this Period

101.93

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

101.93

7423.95

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Catherine Peyton

Mailing Address 3 Santa Clara Court

City	State	Zip Code
Madison	MS	39110-9127

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : B5FC8BF1431D34615ADA

Amount of Each Disbursement this Period

914.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paul Davis

Mailing Address 475 Brelands Overlook Drive

City	State	Zip Code
Starkville	MS	39759-4550

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : BA9435A472DC040D08CE

Amount of Each Disbursement this Period

878.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jennifer Dunigan

Mailing Address 102 North Mill Street Apt 1004

City	State	Zip Code
Jackson	MS	39201-2010

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2016

Transaction ID : BD7C14512735C4178B23

Amount of Each Disbursement this Period

1326.49

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3119.58

--

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

Mississippi Republican Party

A. Spencer M Ritchie

Mailing Address 924 Arlington Street

City	State	Zip Code
Jackson	MS	39202-1620

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : B2B4E892AF1D94A52992

Amount of Each Disbursement this Period

3349.88

 Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

 Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

 Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3349.88

6469.46

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 33

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Bankcard

Nature of Debt (Purpose):
001-Credit Card Debt

Mailing Address P.O. Box 2557

City State

Zip Code

Omaha

NE

68103-2557

Outstanding Balance Beginning This Period

10071.29

Transaction ID : DD8ECF6DA077541C99F0

Amount Incurred This Period

5414.50

Payment This Period

2000.00

Outstanding Balance at Close of This Period

13485.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

13485.79

2) **TOTALS** This Period (last page this line number only)..... ►

13485.79

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

13485.79

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Transaction ID : H1322ec5cef1e41ee87

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- ☒ Presidential-Only Election Year (28% Federal)
- ☐ Presidential and Senate Election Year (36% Federal)
- ☐ Senate-Only Election Year (21% Federal)
- ☐ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H2 (FEC Form 3X)**ALLOCATION RATIOS**

PAGE 23 OF 33

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER Sustaining Membership 2016 ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported Transaction ID : He9089ca0f8a74e229	FEDERAL % <div>95.00 %</div>	NONFEDERAL % <div>5.00 %</div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 24 OF 33

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 Mississippi Republican Party

NAME OF ACCOUNT

Community Bank

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	2		2	0	1	6

TOTAL AMOUNT TRANSFERRED

7233.79

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7233.79

Transaction ID : H7BF633822C874CFA900

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

7233.79

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

7233.79

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 25 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party**A. Full Name (Last, First, Middle Initial) Transaction ID : H1A3C5CF4B35D47** ☐ Memo Item**First Bankcard**

Mailing Address P.O. Box 2557

City	State	Zip Code
Omaha	NE	68103-2557

Purpose of Disbursement:
001-Credit Card Payment

Activity or Event Identifier:

AdministrativeCategory/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1000.00

Date

MM	DD	YYYY
01	14	2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

280.00

720.00

1000.00

B. Full Name (Last, First, Middle Initial) Transaction ID : HD778964026EC400 ☒ Memo Item**Exxon**

Mailing Address 916 Old Robinson Road

City	State	Zip Code
Louisville	MS	39339

Purpose of Disbursement:
Travel expense cc payment 1.14.16

Activity or Event Identifier:

ADMINISTRATIVE

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42.83

Date

MM	DD	YYYY
10	28	2015

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

11.99

30.84

42.83

C. Full Name (Last, First, Middle Initial) Transaction ID : HCC99755FBF4645 ☒ Memo Item**Kangaroo Express**

Mailing Address 1000 Cedar Lake Rd

City	State	Zip Code
Biloxi	MS	39530

Purpose of Disbursement:
Travel expense cc payment 1.14.16

Activity or Event Identifier:

ADMINISTRATIVE

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

23.52

Date

MM	DD	YYYY
10	22	2015

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.59

16.93

23.52

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

280.00

720.00

1000.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 26 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Transaction ID : H3D140C496CFF465 <input checked="" type="checkbox"/> Memo Item Delta Air Mailing Address 18627 28th Ave S City Seatac State WA Zip Code 98158-1302 Purpose of Disbursement: Travel expense cc payment 1.14.16 Activity or Event Identifier: ADMINISTRATIVE			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 277.74 Date 11 / 08 / 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 77.77 + 199.97 = 277.74			

B. Full Name (Last, First, Middle Initial) Transaction ID : HB952A3B81EB84A <input checked="" type="checkbox"/> Memo Item Verizon Wireless Mailing Address P.O. Box 660108 City Dallas State TX Zip Code 75266-0108 Purpose of Disbursement: Phone service cc payment 1.14.16 Activity or Event Identifier: ADMINISTRATIVE			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 294.30 Date 11 / 05 / 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 82.40 + 211.90 = 294.30			

C. Full Name (Last, First, Middle Initial) Transaction ID : HFE6B0AC0D3284E <input checked="" type="checkbox"/> Memo Item Shell Oil Mailing Address 2799 Pass Rd City Biloxi State MS Zip Code 39531-2600 Purpose of Disbursement: Travel expense cc payment 1.14.16 Activity or Event Identifier: ADMINISTRATIVE			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 6.09 Date 10 / 23 / 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1.71 + 4.38 = 6.09			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 27 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party**A. Full Name (Last, First, Middle Initial) Transaction ID : H84B68408DC814A6** ☒ Memo Item**Turbobridge**Mailing Address 4905 Del Ray Avenue
Suite 300City State Zip Code
Bethesda MD 20814-2558Purpose of Disbursement:
Phone cc payment 1.15.16Activity or Event Identifier:
ADMINISTRATIVECategory/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

17.96

Date 10 / 31 / 2015

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.03

12.93

17.96

B. Full Name (Last, First, Middle Initial) Transaction ID : H02DC283375E44A9 ☒ Memo Item**Kangaroo Express**

Mailing Address 1000 Cedar Lake Rd

City State Zip Code
Biloxi MS 39530Purpose of Disbursement:
Travel expense cc payment 1.14.16Activity or Event Identifier:
ADMINISTRATIVECategory/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

13.62

Date 10 / 22 / 2015

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.81

9.81

13.62

C. Full Name (Last, First, Middle Initial) Transaction ID : H4AC30D055A4445I ☒ Memo Item**Jackson Marriott**

Mailing Address 200 East Amite St.

City State Zip Code
Jackson MS 39201-2404Purpose of Disbursement:
Lodging cc payment 1.15.16Activity or Event Identifier:
ADMINISTRATIVECategory/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

459.06

Date 11 / 03 / 2015

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

128.54

330.52

459.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 28 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Transaction ID : H69D1F3DD4136408 <input checked="" type="checkbox"/> Memo Item White House Hotel Mailing Address 1230 Beach Boulevard City Biloxi State MS Zip Code 39530-3647 Purpose of Disbursement: Lodging cc payment 1.14.16 Activity or Event Identifier: ADMINISTRATIVE			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 267.13 Date 10 / 23 / 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 74.80 + 192.33 = 267.13			

B. Full Name (Last, First, Middle Initial) Transaction ID : H1A92B8B232C6437 <input checked="" type="checkbox"/> Memo Item Hilton Garden Inn Mailing Address 975 MS-12 City Starkville State MS Zip Code 39759 Purpose of Disbursement: Lodging cc payment 1.15.16 Activity or Event Identifier: ADMINISTRATIVE			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 131.82 Date 10 / 29 / 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 36.91 + 94.91 = 131.82			

C. Full Name (Last, First, Middle Initial) Transaction ID : HC772D7B0C169411 <input checked="" type="checkbox"/> Memo Item Clarion-Ledger Mailing Address P. O. Box 23067 City Jackson State MS Zip Code 39225-3067 Purpose of Disbursement: Subscription cc payment 1.14.16 Activity or Event Identifier: ADMINISTRATIVE			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 10.00 Date 11 / 02 / 2015
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.80 + 7.20 = 10.00			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 30 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Transaction ID : HDD62615EFCAC42 ☒ Memo Item

Back Yard Burger

Mailing Address 185 House Carlson Cv

City	State	Zip Code
Batesville	MS	38606-7646

Purpose of Disbursement:
CC payment 1.15.16 MealActivity or Event Identifier:
ADMINISTRATIVECategory/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9.83

Date

MM	DD	YYYY
10	30	2015

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.75

7.08

9.83

B. Full Name (Last, First, Middle Initial) Transaction ID : HF6D08FAA392C486 ☒ Memo Item

Sendgrid

Mailing Address 929 Pearl St. Ste 200

City	State	Zip Code
Boulder	CO	80302

Purpose of Disbursement:
Web Services cc payment 1.15.16Activity or Event Identifier:
ADMINISTRATIVECategory/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

323.80

Date

MM	DD	YYYY
11	01	2015

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

90.66

233.14

323.80

C. Full Name (Last, First, Middle Initial) Transaction ID : H12FBF619B8F0430 ☐ Memo Item

Comcast

Mailing Address P.O. Box 105184

City	State	Zip Code
Atlanta	GA	30348-5184

Purpose of Disbursement:
001-CableActivity or Event Identifier:
AdministrativeCategory/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2432.16

Date

MM	DD	YYYY
01	15	2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

83.20

213.96

297.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

83.20

213.96

297.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 31 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Transaction ID : H97FABCFCD18F43 <input type="checkbox"/> Memo Item City Services Center			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Payment Processing Center P.O. Box 1595					
City Jackson	State MS	Zip Code 39215-1595			
Purpose of Disbursement: 001-Water/Sewer			Allocated Activity or Event Year-To-Date 2432.16		
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>		
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
37.80			97.20		135.00

B. Full Name (Last, First, Middle Initial) Transaction ID : HD9EDBCACD82147 <input type="checkbox"/> Memo Item First Bankcard			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2557					
City Omaha	State NE	Zip Code 68103-2557			
Purpose of Disbursement: 001-Credit Card Payment			Allocated Activity or Event Year-To-Date 2432.16		
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>		
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
280.00			720.00		1000.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H78A310D4CC7D48 <input type="checkbox"/> Memo Item Logan Farms Cafe			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1220 E. Northside Dr. Suite 250					
City Jackson	State MS	Zip Code 39211-5548			
Purpose of Disbursement: 001-Catering Costs			Allocated Activity or Event Year-To-Date 3751.82		
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>		
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
118.24			304.06		422.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
436.04		1121.26		1557.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 32 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Transaction ID : H8B9249FB8A9E4E5 <input type="checkbox"/> Memo Item Atmos Energy Mailing Address PO Box 9001949 City State Zip Code Louisville KY 40290-1949 Purpose of Disbursement: 001-Utilities Activity or Event Identifier: Administrative Category/ Type			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 3751.82 Date 01 / 26 / 2016
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 49.67 127.74 177.41			

B. Full Name (Last, First, Middle Initial) Transaction ID : HACC15D49790B435 <input type="checkbox"/> Memo Item Entergy Mailing Address P. O. Box 8105 City State Zip Code Baton Rouge LA 70891-8105 Purpose of Disbursement: 001-Electricity Activity or Event Identifier: Administrative Category/ Type			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 3751.82 Date 01 / 26 / 2016
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 119.56 307.44 427.00			

C. Full Name (Last, First, Middle Initial) Transaction ID : HE263E9455BB542E <input type="checkbox"/> Memo Item U. S. Postmaster Mailing Address General Mail Facility City State Zip Code Jackson MS 39201 Purpose of Disbursement: 001-Postage Activity or Event Identifier: Administrative Category/ Type			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 3751.82 Date 01 / 26 / 2016
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 39.20 100.80 140.00			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
208.43		535.98		744.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 33 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party**A. Full Name (Last, First, Middle Initial) Transaction ID : HE6622E875DC647E** ☐ Memo Item**FP Mailing Solutions**

Mailing Address P.O. Box 4510

City	State	Zip Code
Carol Stream	IL	60197-4510

Purpose of Disbursement:
001-Postage Meter

Activity or Event Identifier:

AdministrativeCategory/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3751.82

Date

MM	DD	YY
01	26	2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

42.83

110.12

152.95

B. Full Name (Last, First, Middle Initial) Transaction ID : H826D24F7D7C44C5 ☐ Memo Item**Direct Mail Systems**

Mailing Address 12450 Automobile Boulevard

City	State	Zip Code
Clearwater	FL	33762-4427

Purpose of Disbursement:
Direct MailActivity or Event Identifier:
Sustaining Membership 2016Category/
Type

Allocated Activity or Event:

☐ Administrative ☒ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1640.35

Date

MM	DD	YY
01	26	2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1558.33

82.02

1640.35

C. Full Name (Last, First, Middle Initial) ☐ Memo Item

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement:

Activity or Event Identifier:

Category/
Type

Allocated Activity or Event:

☐ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

MM	DD	YY

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1601.16

192.14

1793.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

2608.83

2783.34

5392.17